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CONGRESS OF MICRONESIA

SAIPAN, MARIANA ISLANDS, 96950

SPECIAL JOINT COMMITTEE
CONCERNING RONGELAP &
UTIRIK ATOLLS

(Public Law 4C-33)

Senator Olympio T. Borja, Chairman
Representative Timothy Oikeriil
Representative Hans Wiliander

April 23, 1973

The Chairman
The Atomic Energy Commission
Washington, D.C. 20545

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Dear Mr. Chairman:

I am taking the liberty of forwarding to you under cover of this letter a copy of my Committee's report concerning the people of Rongelap and Utirik Atolls of the Marshall Islands District who were exposed to radiation as a result of an H-bomb test at Bikini Atoll on March 1, 1954.

The report and the recommendations were duly adopted by the Congress of Micronesia during the First Regular Session of the Fifth Congress. I hope you will have the time to personally review the contents of this report and that you will find it both interesting and informative.

As you may know, the Special Joint Committee Concerning Rongelap and Utirik Atolls of the Congress of Micronesia was created because of a concern by members of Congress about the medical treatment of the people of those islands. The Committee was created by Public Law No. 4C-33, and its life extended to March 30, 1975, by the Congress of Micronesia on February 26, 1973, by passage of House Joint Resolution No. 73. The Committee was duly organized after the 1972 annual survey by the Brookhaven National Laboratory medical team was halted in March. Since that time, as is recounted in our report, the Committee has worked together with the Trust Territory Government and Dr. Robert A. Conard of Brookhaven to help complete the annual survey in September of 1972. This survey, at the Committee's request, included four additional doctors: Dr. William S. Cole of the Bureau of Radiological Health through the assistance of former Surgeon General Jesse L. Steinfeld, Dr. Haruo Ezaki of Hiroshima University, Dr. Toshiyuki Kumatori of the Japanese National Institute for Radiological Sciences, and Dr. E. Eric Pochin, C.B.E., F.R.C.P., who was recommended by the World Health Organization.

4/23/73

During February of 1973 our report was presented to the Congress of Micronesia. During that same session of the Congress, the Committee also introduced Senate Bill No. 89, A Bill for an Act...

"To provide for certain care and benefits to the people of Rongelap and Utirik Atolls exposed to the March 1, 1954 H-bomb test fallout; to provide for care and benefits to certain other people from Rongelap and Utirik, and for other purposes."

This bill, a copy of which is enclosed with this letter, became Public Law No. 5-52 on April 11, 1973. You will note that "Section 10. Expenses" directs the High Commissioner of the Trust Territory to "seek an executive agreement with the Atomic Energy Commission whereby the expenses incurred under the provisions of this act will be defrayed either directly or on a reimbursable basis by the Atomic Energy Commission and report his findings no later than thirty days after the effective date of this act."

I would thus, as one of the primary purposes of this letter, wish to express the Committee's support of any request made by the High Commissioner of the Trust Territory of the Pacific Islands for financial support of the intent of this bill. By virtue of the Committee's introduction of the measure and the High Commissioner's signing of this bill into law, the law represents a concerted effort by both the executive and legislative branches of our government to secure such support from your agency for these unfortunate people. We are hopeful for a favorable response for a number of reasons, among them:

* The maximum amount it would cost per year has been estimated at about \$10,000.

* These additional examinations would be productive for the Brookhaven National Laboratory studies carried out by Dr. Conard and his team, and thus, indirectly beneficial to the Commission.

* The Commission's support of this funding would be good public relations since it is a demonstration of goodwill and would indicate to the Utirikese and Rongelapese that it was willing to discharge its obligations to them. We feel this is only right and proper since the Commission shares the legal and moral responsibility for their original exposure.

We believe the Commission will see the logic of providing such support and will realize the goodwill it will generate and will thus act positively as regards the High Commissioner's request.

Related to the above request, we would like to ask the Commission what support it would be able to give directly or otherwise in recruiting a medical doctor with a background in radiation-induced disease and stationing him in the Marshall Islands District. At present, Dr. Knudsen

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of Brookhaven is stationed on Kwajalein for a one year period which will expire sometime in June of this year. The purpose of Dr. Knudsen's presence is to conduct interim minor examinations of the Rongelapese and Utirikese, to gather vital statistics, and to insure that the people are taking their prescribed medication. Such time as Dr. Knudsen has free from this work, he assists Trust Territory Medical personnel at the facilities at Ebeye in the Kwajalein Atoll or on Majuro. It is the Committee's understanding that Dr. Knudsen will not be available for this purpose after June. Dr. Conard has also related to us that it will be extremely difficult to find a replacement for him. Both the Committee and the people of Rongelap and Utirik, however, are quite insistent that they would like to have an "AEC" doctor replace Dr. Knudsen. We feel that it would be especially relevant now, in view of the death last November of Leko J Anjain from acute myelogenous leukemia.

Again, such a move would not only be physically and psychologically beneficial to the people involved, but also would benefit Brookhaven and the Commission. We believe that while the recruitment of such a person might be somewhat difficult, it is not impossible. As mentioned in our report, the former Surgeon General of the United States Public Health Service noted that of the 40,000 PHS employees, about 12,000 were of a professional level. We believe that the AEC, through its direct or indirectly-funded research in the areas of biology and medicine, has access to a similarly immense manpower resource and that it is within the realm of possibility to recruit every year or two a qualified person for this job.

Another matter on which we would like your response concerns funding for Dr. Conard's work at Brookhaven. In our recommendations we suggested that the Commission allot additional funding for new or additional work which Dr. Conard feels will be beneficial for the people of Rongelap and Utirik. We have traveled with Dr. Conard's team twice now, and although we have never heard him publicly complain for lack of funds we get the impression that the annual surveys are limited in duration and extent partly due to budgetary constraints. We have noticed that Dr. Conard is extremely careful regarding disbursement of funds and incurring expenses which can be charged to Brookhaven. Considering this, and the new development of a case of leukemia among the exposed, additional funding would enable Dr. Conard to render more completely the service he feels necessary to the people and to conduct what research he may consider valuable.

Another subject we wish to bring to your attention is the concern of the people of the two islands about the effects of radiation on the food which they consume. Since we have just recently completed a tour of the islands during which we individually interviewed about 80 persons, we feel we are in a good position to know how they feel. The feeling, almost to a man, is that they are suspicious that the local starch food and seafood they consume still contains radioactivity. Since their

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understanding of the nature of fission products deposited in the soils and waters of their homes is severely limited, this results in a situation where they worry about eating certain foods, or refuse to eat them at all. During the September 1972 survey, Dr. Conard informed the people on Rongelap that they could now eat coconut crabs from Rongelap and Arbar islands. Our survey revealed that nearly all of the people interviewed were still afraid to eat this item. Furthermore, some people on Rongelap still do not eat giant clams, (Tridacna Gigas), even though they selectively concentrate the radionuclide Co^{60} which has a relatively short half-life and by now they should be quite safe to eat. Not surprisingly, the people of Utirik also worry about this same thing, even though their estimated exposure and that of their islands was roughly one-tenth that of the Rongelapese. We are aware that Dr. Edward E. Held, formerly with the University of Washington Laboratory of Radiation and now with the Commission, has conducted radioecological surveys at Rongelap and Utirik as recently as 1969. We would like your response to a proposed further extensive radiological survey of Rongelap and Utirik (perhaps in conjunction with the 1974 annual examination) and a report to the people of those two islands in Marshallese to alleviate their worry about this particular matter.

Related to this matter, although beyond the scope of our mandate, we believe the Commission should take under advisement the suggestion to carry out extensive radiological surveys of the Bikini and Enewetok Atolls prior to the resettlement of the former inhabitants. The results of the surveys could then be translated into Marshallese in layman's terms and explained to the people before their return. This might prevent misunderstandings and apprehension developing on those two atolls similar to those which have developed on Rongelap and Utirik.

A further matter we would like to broach with the Commission is one of which we became aware during the survey this March. For the first time in 19 years it was made clear to the Rongelapese that Dr. Conard did not work for or represent the Atomic Energy Commission. This long-standing misunderstanding of associating Dr. Conard with the people the Rongelapese consider responsible for their original contamination and exposure has in the past burdened the good doctor with listening to complaints and requests of the people which should more properly be directed to a representative of the Commission. We would like to inquire about the possibility of having a representative of the AEC accompany either the Special Joint Committee on a future trip to the two atolls or Dr. Conard's team next March. Specifically, Mr. W. K. Streenan of the AEC's Pacific Area Support Office in Honolulu might be the logical person to serve this function.

At present the Special Joint Committee is undertaking a study of possible additional compensation for the people of Rongelap and Utirik for thyroidectomies, loss of earnings from inability to produce copra


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during time of dislocation, and exposure of the land and atoll waters to radiation. We would appreciate any assistance which the Commission might be able to make available to the Committee's future requests for information or advice.

Lastly, I should note that there is a possibility that I and the Committee's staff member may be in New York during June for the meeting of the United Nations Trusteeship Council. Should that materialize, doubtless we will wish to travel to Washington to meet with a representative of the Commission to discuss more fully the concerns of mutual interest which we have brought forth in this letter.

If I or the Committee may be of any assistance to the Commission in the future, please do not hesitate to notify me. With hopes for your favorable consideration to the above proposals, I am

Sincerely yours,



Senator Olympia T. Borja
Chairman
Special Joint Committee Concerning
Rongelap and Utirik

Enclosures (2)

xc: Stanley S. Carpenter, Dep. Ass't. Secretary for Territorial Affairs
Edward E. Johnston, High Commissioner, Trust Territory of the Pacific
Islands

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Congress of Micronesia

CAPITOL HILL

SAIPAN

MARIANA ISLANDS

96950

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PRESIDENT

Toshiwo Nakayama

S.B. No. 89, S.D.1

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Edward DLG. Pangellinan

MARSHALLS DISTRICT

Amata Kabua

Wilfred I. Kendall

PALAU DISTRICT

Lazarus E. Sall

Roman Tmetuchi

PONAPE DISTRICT

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Ambrios Iehsi

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Tosiwo Nakayama

Andon Amaralch

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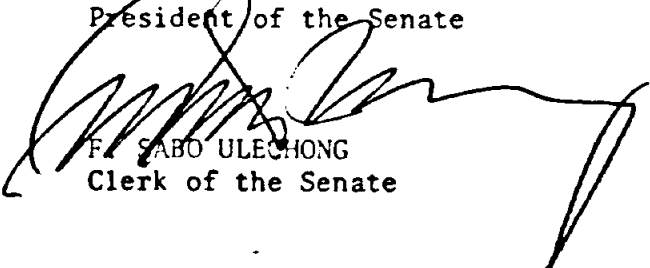
John A. Mangefel

THE SENATE OF THE CONGRESS OF MICRONESIA

We hereby certify that the foregoing Bill passed Second and Final Reading in the Senate of the Congress of Micronesia, Fifth Congress, First Regular Session, 1973, on the 13th day of February, 1973, by a majority vote of all the members to which the Senate is entitled.


TOSIWO NAKAYAMA

President of the Senate


F. SABO ULECHONG

Clerk of the Senate

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Sungiwo Hadley

Joab Sigrah

TRUK DISTRICT

Endy Oois

Sasauo Haruo

Masao Nakayama

Ray Setik

Machime O'Sonis

YAP DISTRICT

Luke M. Tman

John Rugullmar

THE HOUSE OF REPRESENTATIVES OF THE CONGRESS OF MICRONESIA

We hereby certify that the foregoing Bill passed Second and Final Reading in the House of Representatives of the Congress of Micronesia, Fifth Congress, First Regular Session, 1973, on the 24th day of February, 1973, by a majority vote of all the members to which the House is entitled.


BETHWEL HENRY, Speaker

House of Representatives


ASTERIO R. TAKESY, Clerk

House of Representatives

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FIFTH CONGRESS OF MICRONESIA

FIRST REGULAR SESSION, 1973

AN ACT

To provide for certain care and benefits to the people of Rongelap and Utirik Atolls exposed to the March 1, 1954, H-Bomb fallout; to provide for care and benefits to certain other people from Rongelap and Utirik, and for other purposes.

BE IT ENACTED BY THE CONGRESS OF MICRONESIA:

1 Section 1. Short title. This act is known and may be cited
2 as the Trust Territory Fallout Survivors Act.

3 Section 2. Statement of intent. As a result of the March 1,
4 1954, "Bravo" shot of the Castle Test Series conducted by Joint
5 Task Force Seven at Bikini Atoll, 82 Rongelapese, 157 Utirikese,
6 23 Japanese fishermen, and 28 American servicemen were exposed
7 to radioactive fallout which contaminated their places of
8 habitation. It is thus the sense of the Congress of Micronesia
9 that the exposed Rongelapese and Utirikese represent unique
10 groups of people in the Trust Territory because of their experience.
11 It is the further sense of the Congress that because of the special
12 and unique effects of radiation which, in the case of the Rongelapese,
13 have been manifested in cases of thyroid nodules, thyroid cancer, one
14 possible case of leukemia, and other effects -- that these people
15 should be accorded special care and treatment by the Trust
16 Territory Government in order to preserve and protect their health.
17 Finally, it is also the sense of the Congress, that examination
18 of these exposed people requires the examination of nonexposed
19 persons; that the health of these nonexposed persons must be
20 maintained at the same level as those exposed; and that these
21 nonexposed persons as provided for in this act should also be
22 entitled to the same care and benefits as exposed persons.

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1 Section 3. Definitions. In this act, unless the context
2 otherwise requires, the following definitions shall apply:

3 (1) "Exposed person" means any Micronesian citizen
4 who was on Rongelap Atoll, Ailinginae Atoll, or Utirik Atoll on
5 March 1, 1954, or who was born within ten months after that date.

6 (2) "Descendents of exposed persons" means children
7 whose mother or father was an exposed person.

8 (3) "Control" means those persons now living in the
9 Marshall Islands District who were not exposed to fallout from
10 the March 1, 1954, test, but who agree as hereinafter provided
11 in this act, to be examined and tested in like manner as exposed
12 persons.

13 Section 4. Benefits. The care and benefits provided by
14 the Trust Territory for the exposed persons, descendants of
15 exposed persons, and control persons shall be:

16 (1) Transportation from their place of residence to
17 the hospital on Majuro, or Ebeye when that facility is completed,
18 and return to their place of residence. Transportation for one
19 immediate member of the family of the person will also be provided
20 at no expense.

21 (2) Per diem at standard Trust Territory rates will be
22 provided to the person requesting examination and also to the one
23 person allowed to accompany him. The office of the District Director
24 of Health Services shall be responsible for assisting such persons
25 in securing their proper per diem.

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1 (3) Housing at no cost to such persons shall be
2 provided by the Marshall Islands District Government when such
3 persons are in Majuro or Ebeye for examination or treatment;
4 PROVIDED, HOWEVER, that this Section shall not be construed
5 to require such persons to live in government housing should
6 they choose to make their own housing arrangements.

7 (4) Free medical care including medication, treatment,
8 and hospitalization shall be accorded to such persons.

9 Section 5. Record of expenses. The District Director of
10 Health Services and the District Director of Finance shall be
11 responsible for maintaining records of all expenses incurred
12 under the provisions of this act and the District Director of
13 Health Services shall provide a quarterly report of the expenses
14 to the Office of the High Commissioner, the Office of the Legislative
15 Counsel of the Congress of Micronesia, and to the Director of the
16 Department of Health Services of the Trust Territory. The annual
17 expenses incurred under the provisions of this act shall be defrayed
18 as provided for in Section 10 of this act.

19 Section 6. Procedures. The persons mentioned in Section 3
20 of this act shall initiate their request for transportation to a
21 hospital facility with the health aide or other representative of
22 the Trust Territory Department of Health Services. If a field
23 trip vessel is at the island, the health aide, if he believes the
24 request is valid, shall so advise the doctor aboard or the master
25 of the ship in lieu of a doctor. If the health aide is not on the

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1 island, the person should ask the magistrate, council member,
2 school teacher or other recognized community leader to act
3 in his behalf. This Section shall not be construed to allow
4 persons the aforesaid benefits if the ailment or complaint
5 could have been treated at the person's place of residence,
6 by the health personnel available. It should further not be
7 construed to require the rerouting of ships or planes for
8 minor ailments or complaints which can be treated on the
9 island; PROVIDED, HOWEVER, that an exposed, descendant of
10 an exposed, or a control person who has a serious and acute
11 complaint, illness, or accident shall be transported in a like
12 manner as any other emergency patient.

13 Section 7. Handbook. The Department of Health Services,
14 the District Office of Health Services and the Special Joint
15 Committee Concerning Rongelap and Utirik Atolls, in conjunction
16 with the Brookhaven National Laboratory, shall cause to be
17 created and reproduced a handbook to be given to exposed,
18 descendants of exposed, and control persons. Said handbook
19 shall contain, but not be limited to, the following information:
20 Exposed or nonexposed status, date of birth, sex, name and Brookhaven
21 National Laboratory case number of the person. Space shall also be
22 provided for a record of medical examinations and findings in the
23 Marshallese language.

24 Section 8. Eligibility. Exposed persons and descendants of
25 exposed persons are automatically eligible for the benefits provided

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1 under this act. Control persons shall become eligible only upon
2 signing a written agreement in both Marshallese and English
3 which provides that said person will become eligible for the
4 aforementioned benefits only if he or she agrees to act as a
5 control person. The District Director of Health Services shall
6 be responsible for drafting said agreement in conjunction with
7 the Director of the Department of Health Services and Brookhaven
8 National Laboratory. All persons who are transported to Majure
9 or Ebeye for examination under the provisions of this act shall
10 sign a statement prior to leaving their home island, agreeing to
11 submit to a complete medical examination, which shall include, but
12 not be limited to a blood test.

13 Section 9. Enforcement. The Director of the Marshall Islands
14 District Health Services shall be nominally responsible for carrying
15 out and enforcing the provisions of this act, but may, at his
16 discretion, confer with other district officials, the Department of
17 Health Services and the Special Joint Committee or the presiding
18 officers of the Congress of Micronesia. The District Director
19 shall insure that those eligible receive the full benefits provided
20 under this act and shall insure that those persons visiting the
21 district center hospital, or other medical facility, are returned
22 to their home island as soon as is appropriate to their condition,
23 within the constraints of normal ship schedules. The District
24 Director shall also include in his quarterly report any and all
25 flagrant or continuous abuses or violations of the intent of this act.

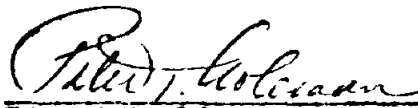
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1 Continued abuse of the privileges and benefits of this act may
2 result in temporary or permanent suspension of the offender
3 from eligibility. A petition to suspend eligibility will be
4 presented by the District Director of Health Services to the
5 Marshall Islands delegation of the Congress of Micronesia.
6 Decisions of the Marshall Islands delegation shall be final.

7 Section 10. The Office of the High Commissioner is directed
8 to seek an executive agreement with the Atomic Energy Commission
9 whereby the expenses incurred under the provisions of this act
10 will be defrayed either directly or on a reimbursable basis by
11 the Atomic Energy Commission and report his findings to the
12 Congress of Micronesia no later than thirty days after the
13 effective date of this act.

14 Section 11. Effective date. This act shall take effect upon
15 the approval by the High Commissioner, or upon its becoming law
16 without such approval.

17
18
19 April 11, 1973

20
21 
22 Edward F. Johnston
23 *Deputy* High Commissioner
24 Trust Territory of the Pacific Islands
25

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